

PDE5 INHIBITORS

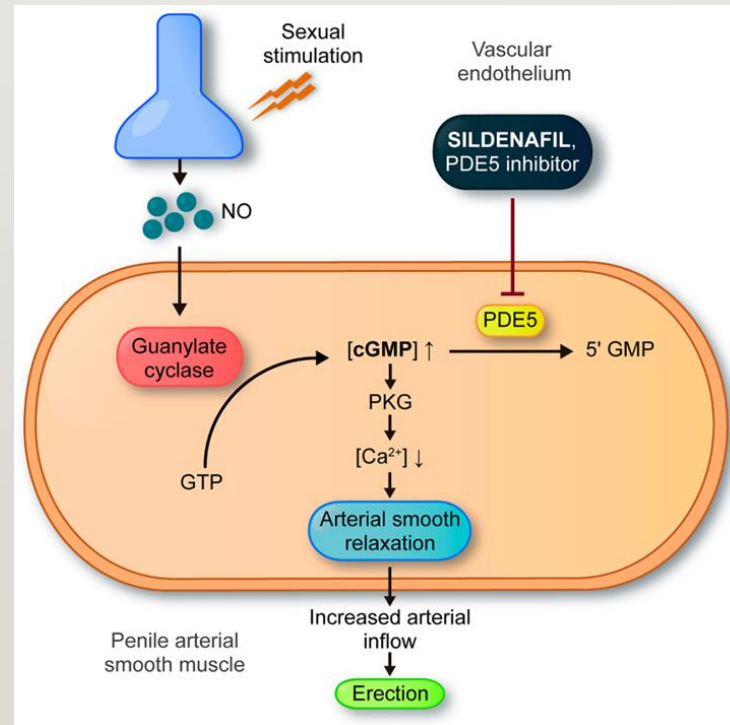
*DR.G.BALAMURUGAN.,M.D.,M.H.SC.,
MANAGING DIRECTOR,ANNAI HOSPITAL,
CONSULTANT SEXOLOGIST, B.M.HOSPITAL,
TREASURER, IASMP(MM),
PAST TREASURER NIMA,
SEXUAL HEALTH EDUCATOR, PGP GROUP OF COLLEGES, NAMAKKAL.*



PDE5 INHIBITOR

- In 1998 FDA approved PDE5 inhibitors. From then PDE5 inhibitors are the first line treatment for ED.
- PDE5 inhibitors are considered the first-line monotherapy because of their safety profile, rapid efficacy, and convenient oral administration.

PDE5 INHIBITOR



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- Mean half life of Sildenafil and vardenafil is 4 hrs.
- Mean half life of Tadalafil is 18 hrs.

PDE5 INHIBITOR

- Sildenafil T max is 1 hr (with high fat meal T_{max} 2hrs)
- Vardenafil T max is 1 hr (not affected by high fat meal)
- Tadalafil T max is 2 hr (not affected by high fat meal)

CONTRAINDICATION

- Nitrate therapy
- Retinitis pigmentosa
- Non arteritic anterior ischemic optic neuropathy
- Severe hepatic impairment
- Severe renal impairment

BENEFITS

- No time bound sexual erection with daily dose of long acting PDE5I. That is, Anytime patient is ready to perform.
- Convenient to carry and consume.
- Cost effective.

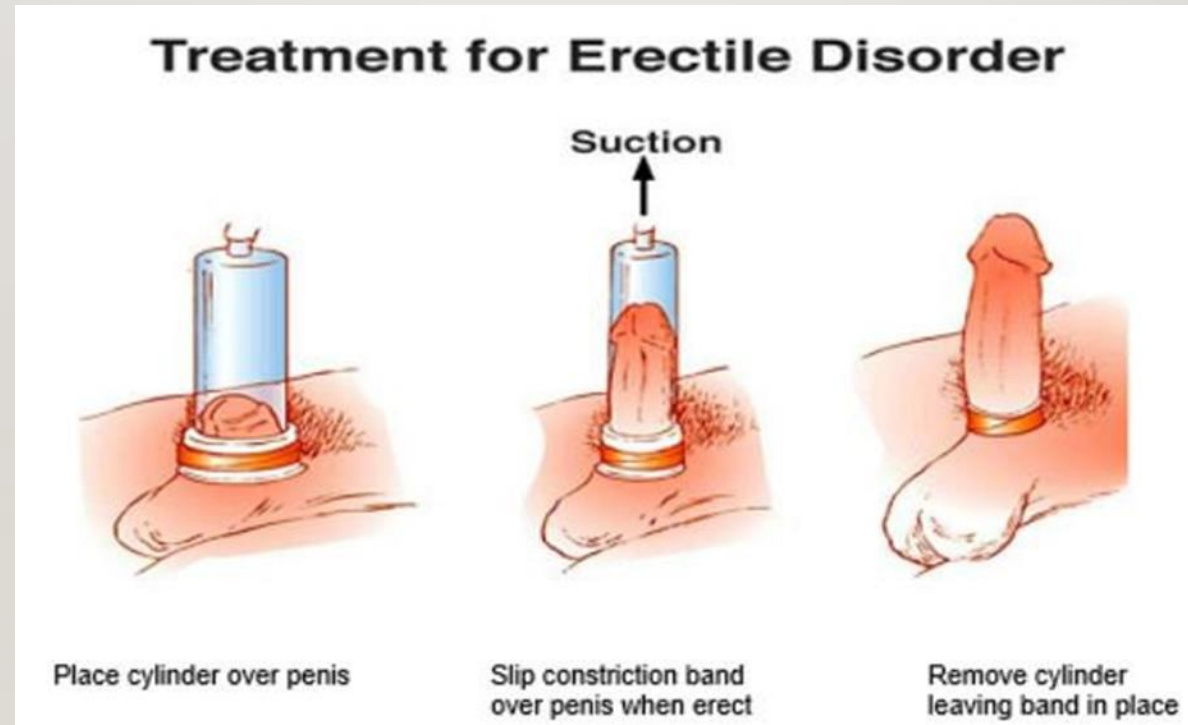
VACUUM DEVICE

- Vacuum device → non-invasive treatment.
- The pump creates vacuum within the chamber thereby mechanically drawing the blood within the penile tissues causing it to engorge and the constriction ring “traps” this pooled blood thus maintaining the erection of the penis.
- So, intracorporal and extracorporeal compartments filled with blood in VD.
- The effect of the vacuum is evident only distal to the ring and not the entire shaft of penis as in the natural erection.

VACUUM DEVICE

- With vacuum device the erection would last until the constricting band is released.
- The devices are very reliable and seem to work better with increased use and practice.

VACUUM DEVICE



VACUUM DEVICE

- Cost effective.
- No mental or physical stimulation needed.
- User friendly.
- Erection lost for long time.
- Advisable to all age group.
- Can be used in artriogenic and neurogenic ED.

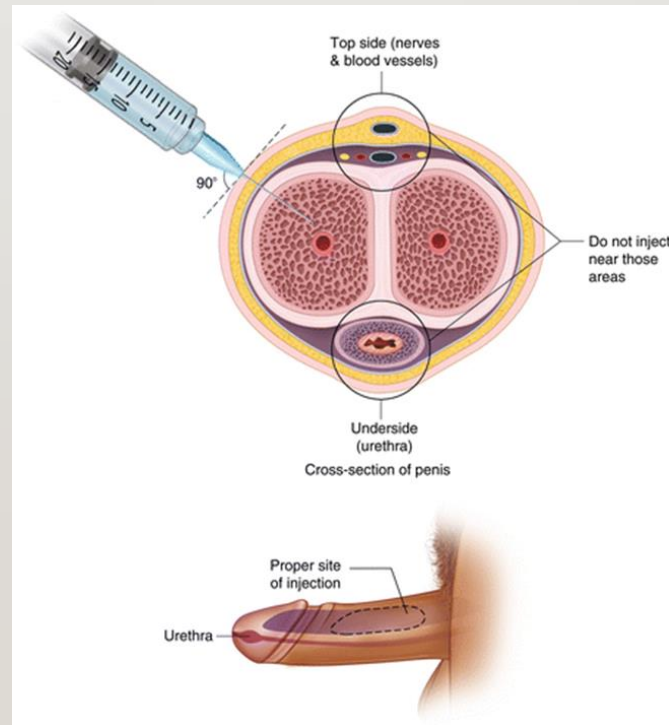
VACUUM DEVICE

- Less “romantic” -the inability to hide the tension ring.
- Need to assemble the equipment - relative lack of spontaneity.
- Difficulty of transporting it.
- Major drawback is loss of/ difficulty with ejaculation.
- Side effects → painful ejaculation, penile pain, ecchymoses, and hematoma formation.

ICIVAD

- Injection of vasoactive drugs in to the cavernous tissue.
- Drugs used as ICI are prostaglandin, papaverine, phentolamine, atropine, chlorpromazine

ICIVAD



ICIVAD

- Even minimal genital stimulation can trigger an erection.
- ICIVAD-is useful in patients with neural injury from pelvic surgery, trauma, diabetic patients, and patients who desire rapid onset of erection, greater rigidity and or duration of erection.
- PDE5inhibitors,in addition to intracavernous injection therapies, are associated with the most successful nondevice-based current strategies for mild to moderate cases of ED.

BENEFITS

- Minimal stimulation is enough to achieve erection.
- Rapid onset of erection, greater rigidity.
- Erection lost longer.
- Can be used in psychogenic ED.

DRAWBACKS

- Most unwanted side effect is priapism.
- Common side effects are fibrosis, Peyronie's disease, and pain.

THANK YOU